



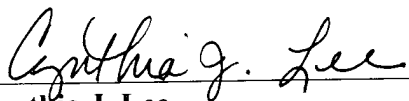
3FW/AF

## CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop AF**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**

on February 22, 2006

  
Cynthia J. Lee

In Re Application of:

**Joseph et al.**

Group Art Unit: **1763**

Serial No.: **10/695,591**

Examiner: **Culbert, Roberts P.**

Filed: **October 28, 2003**

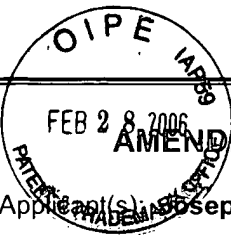
Docket No. **62020-1560**

For: **Microstructures and Methods of Fabrication Thereof**

The following is a list of documents enclosed:

Return Postcard  
Transmittal Letter  
Response to Final Office Action

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

**AMENDMENT TRANSMITTAL LETTER (LARGE)**

Applicant(s): Joseph, et al.

Docket No.

**62020-1560**Serial No.  
**10/695,591**Filing Date  
**October 28, 2003**Examiner  
**Culbert, Roberts P.**Confirmation No.  
**5369**Group Art Unit  
**1763**Invention: **Microstructures and Methods of Fabrication Thereof****Commissioner for Patents  
Mail Stop Amendment  
P.O. Box 1450  
Alexandria VA 22313-1450**

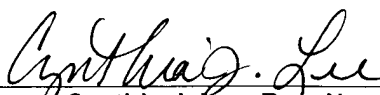
Transmitted herewith is Response to Final Office Action in the above-identified application.

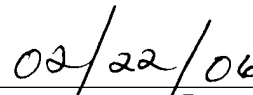
The fee has been calculated and is transmitted as shown below

**CLAIMS AS AMENDED**

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	31 -	31 =	0	X \$25.00	\$0
INDEP. CLAIMS	4 -	4 =	0	X \$100.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$180.00	\$0
EXTENSION FEE	1 <sup>ST</sup> MONTH <input type="checkbox"/> \$60.00	2 <sup>ND</sup> MONTH <input type="checkbox"/> \$225.00	3 <sup>RD</sup> MONTH <input type="checkbox"/> \$510.00	4 <sup>TH</sup> MONTH <input type="checkbox"/> \$795.00	\$0
Other Fees:					\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0

- ☒ No additional fee is required.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_. A duplicate copy of this page is enclosed.
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$\_\_\_\_\_.
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.

  
Cynthia J. Lee, Reg. No. 46,033

  
Date